



12-11-02

B732

H/H
withdrawn
OK
RTH

PTO/SB/86 (03/02)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT**

Application Number	09/641,646
Filing Date	08/18/2000
First Named Inventor	Cipolla
Group Art Unit	3732
Examiner Name	Wilson, John J.
Attorney Docket Number	13072

To: Assistant Commissioner for Patents
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Petitioner's client has failed to pay one or more bills rendered by the practitioner for an unreasonable period of time or has failed to honor an agreement to pay a retainer in advance of the performance of legal services.

DEC 13 2002
700 MAIL ROOM

RECEIVED

1. ☐ The correspondence address is NOT affected by this withdrawal.2. ☒ Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

☐ Customer Number

OR

Place Customer Number
Bar Code Label here☒ Firm or
Individual Name

John L. Reed

Address

BriteSmile, Inc.

Address

490 North Wiget Lane

City

Walnut Creek

State

CA

ZIP

94598

Country

USA

Telephone

(925) 279-2860

Fax

(925) 941-6266

☒ This request is made on behalf of myself and☐ all the attorneys/agents of record,☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or☒ the attorneys/agents associated with Customer Number 23719

This request is enclosed in triplicate (including any attachments).

Name

John J. Santalone, Esq.

Signature

Date

10 December 2002

NOTE: Withdrawal is effective when approved rather than when received.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Certificate of Mailing Under 37 C.F.R. 1.10I hereby declare that this correspondence is being deposited with the United States Postal Service via Express Mail Label No. EX03575046 US in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C.Date: 12/10/2002 Name: Oscar EspinosaAPPROVED
JOHN E. KITTLE
DIRECTOR

TECHNOLOGY CENTER 3700 & 2900